

AO 435 (Rev. 04/18)				ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS		FOR UNITED STATES COURTS SOUTHERN DISTRICT OF TEXAS DUE DATE: District of Texas FILED	
Instructions				TRANSCRIPT ORDER			
1. NAME CAROLINA CRUZ		2. PHONE NUMBER (708) 663-0571		3. DATE 3/11/2022 March 14, 2022			
4. DELIVERY ADDRESS OR EMAIL		5. CITY AUSTIN		6. STATE TX		7. ZIP CODE Nathan Ochsher, Clerk of Court	
8. CASE NUMBER 2'11 CV 84		9. JUDGE Judge Janis Graham Jack		DATES OF PROCEEDINGS			
				10. FROM 3/10/2022		11. TO 3/10/2022	
12. CASE NAME The Refuge Ranch investigation DFPS		LOCATION OF PROCEEDINGS					
		13. CITY BASTROP		14. STATE			
15. ORDER FOR							
<input type="checkbox"/> APPEAL		<input checked="" type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT		<input type="checkbox"/> BANKRUPTCY	
<input type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CIVIL		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)							
PORTIONS		DATE(S)		PORTION(S)		DATE(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)			
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)							
<input type="checkbox"/> OPENING STATEMENT (Defendant)							
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)			
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)							
<input type="checkbox"/> OPINION OF COURT							
<input type="checkbox"/> JURY INSTRUCTIONS				<input type="checkbox"/> OTHER (Specify)			
<input type="checkbox"/> SENTENCING							
<input type="checkbox"/> BAIL HEARING							
17. ORDER							
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS	
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
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HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES				
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>					
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL		0.00	
18. SIGNATURE CAROLINA CRUZ				PROCESSED BY			
19. DATE 3/11/2022				PHONE NUMBER (708) 663-0571			
TRANSCRIPT TO BE PREPARED BY Judicial Transcribers of Texas, LLC				COURT ADDRESS			
ORDER RECEIVED		DATE	BY				
DEPOSIT PAID				DEPOSIT PAID			
TRANSCRIPT ORDERED				TOTAL CHARGES		0.00	
TRANSCRIPT RECEIVED				LESS DEPOSIT		0.00	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT				TOTAL DUE		0.00	

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